
U.S. Representative

John Spratt

South Carolina ■ 5th District

5th District Report

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Health Care Update

by Congressman John Spratt

Health care legislation is at the forefront of Congress, and I would like to bring you up to date on three important measures.

Legislation to make prescription drugs more affordable: Medicare is one of our country's crowning accomplishments, but there is a gaping hole in its coverage: it has no prescription drug benefit. Congress passed drug coverage along with catastrophic coverage in the late 1980s, but senior citizens protested the added cost of catastrophic coverage so strongly that it was repealed, and with it, drug coverage also.

I voted then to keep drug coverage, and I have watched with growing concern as drug costs have gone up and up. Boston University's School of Public Health prepared a report recently for the government, which shows that more than 40 percent of the prescriptions written for Medicare beneficiaries never get filled. Medicare beneficiaries can't afford the cost. Medicare clearly needs prescription drug coverage. With the deficit gone and the budget in the black, we now have the opportunity to provide it.

This year, the President's budget rises to the challenge. As the ranking Democrat on the Budget Committee, I've written the President's proposal into the budget resolution. What we propose is a drug benefit that is voluntary but available to all Medicare beneficiaries. Essentially,

what it offers is “first dollar coverage.” In other words, no deductible has to be paid before coverage kicks in. But there are co-payments and there are monthly premiums. Starting in 2003, Medicare would pay half the cost of all prescription drug costs up to \$2,000. This \$2,000 ceiling would rise to \$5,000 by 2009 when the coverage is fully phased in. Those who choose to have this coverage would pay a monthly premium: \$26 in 2003, rising to \$51 in 2009. Folks with lower incomes would get help in paying their premium and many would get help with their co-payments, too.

The co-payment leaves beneficiaries paying 50 percent of the cost, and the cost of drugs keeps going up. So, there’s another key part to our proposal. The government would set up a system to negotiate prices for Medicare beneficiaries and try to drive down the cost of prescription drugs.

Patients’ Bill of Rights: Last year, the House passed a “Patients’ Bill of Rights” by a good margin. I was an early cosponsor of the bill and I voted for its passage.

If you are in a Health Maintenance Organization (HMO), this bill would make it easier for you to see the doctor of your choice, or go to the emergency room without cumbersome pre-authorization, or get experimental treatments, or if you are a woman, go directly to your gynecologist.

The bill would also give you the power to protest decisions by HMOs, in and out of court, and the right to a speedy resolution. It would also prevent HMOs from “gagging” your doctor and stopping him or her from telling you about more expensive treatment options. Originated by Democrats, this is a sensible bill, and it won the support of 68 House Republicans. A much weaker version passed the Senate. Opponents are out to kill the House bill in conference by watering it down to the Senate’s provisions.

Veterans’ Health Care: If you are a veteran, I am pleased to tell you that the budget I

proposed last year increased veterans' health care by \$1.7 billion, and the budget resolution we are offering this year will add \$1.3 billion on top of that. As a result, care for all categories of veterans, through and including category 7, is being offered this year, and we are finally seeing progress on the veterans' health outpatient clinics, like the one that opened in Rock Hill recently.

If I or my staff can help you with Medicare or Medicaid, or veterans' health care, we will be pleased to do whatever we can. Feel free to give us a call at our office nearest you.

Rock Hill

803-327-1114

Sumter

803-773-3362

Darlington

843-393-3998